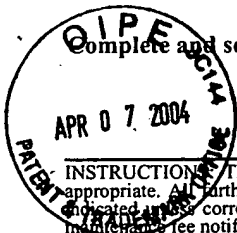


**PART B - FEE(S) TRANSMITTAL**



Complete and send this form, together with applicable fee(s), to: **Mail**

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1095 7590 02/12/2004

**THOMAS HOXIE  
NOVARTIS, CORPORATE INTELLECTUAL PROPERTY  
ONE HEALTH PLAZA 430/2  
EAST HANOVER, NJ 07936-1080**

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<b>See "FILING BY EXPRESS MAIL"</b>	(Depositor's name)
<b>below.</b>	(Signature)
	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/125,329	09/08/1998	ROBERT PORTMANN	4-30028/A/PC	7669

**TITLE OF INVENTION:** CRYSTAL MODIFICATION OF 1-(2,6-DIFLUOROBENZYL)-1H-1,2,3-TRIAZOLE-4-CARBOXAMIDE AND ITS USE AS ANTIEPILEPTIC

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$0	\$1330	05/12/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
MORRIS, PATRICIA L	1625	514-359000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Joseph J. Borovian

2. \_\_\_\_\_

3. \_\_\_\_\_

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**NOVARTIS AG**

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**BASEL, SWITZERLAND**

**RECORDED March 4, 2002 REEL 012696 FRAME 0886**

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☐ corporation or other private group entity ☐ government

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- ☒ Issue Fee
- ☐ Publication Fee
- ☒ Advance Order - # of Copies 10

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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0134 (enclose an extra copy of this form).

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(Authorized Signature)

(Date) 4/7/04

**Joseph J. Borovian Registration No. 26,631**

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**FI 997255399 IIS**

**Express Mail Label Number**

**April 7, 2004**

**Date of Deposit**

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**01 FC:1501 1330.00 DA  
02 FC:8001 30.00 DA**

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